

DO/ EO WORKSHEET

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<input type="checkbox"/> PCT/IPEA/409 IPER : <input type="checkbox"/> EP <input type="checkbox"/> JP <input type="checkbox"/> SE <input type="checkbox"/> AU <input type="checkbox"/> US <input type="checkbox"/> FR <input type="checkbox"/> CN <input type="checkbox"/> ES <input type="checkbox"/> RU <input type="checkbox"/> AT <input type="checkbox"/> KR <input type="checkbox"/> _____	<input type="checkbox"/> PCT/ISA/210 - Search Report : <input type="checkbox"/> EP <input type="checkbox"/> JP <input type="checkbox"/> SE <input type="checkbox"/> AU <input type="checkbox"/> US <input type="checkbox"/> FR <input type="checkbox"/> CN <input type="checkbox"/> ES <input type="checkbox"/> RU <input type="checkbox"/> AT <input type="checkbox"/> KR <input type="checkbox"/> _____ <input type="checkbox"/> NONE
<input type="checkbox"/> Annexes to 409	<input type="checkbox"/> Search Report References
<input type="checkbox"/> PCT/ISA/237 : <input type="checkbox"/> EP <input type="checkbox"/> JP <input type="checkbox"/> SE <input type="checkbox"/> AU <input type="checkbox"/> US <input type="checkbox"/> FR <input type="checkbox"/> CN <input type="checkbox"/> ES <input type="checkbox"/> RU <input type="checkbox"/> AT <input type="checkbox"/> KR <input type="checkbox"/> _____	<input type="checkbox"/> N/A
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RECEIPTS FROM THE APPLICANT (other than checked above) :

<input type="checkbox"/> Basic National Fee (or authorization to charge)	<input type="checkbox"/> Preliminary Amendment(s) Filed on : 1. <input type="checkbox"/> same as 371 request date 2. _____ 3. _____
<input type="checkbox"/> Description <u>13</u> <input type="checkbox"/> Claims <input checked="" type="checkbox"/> Abstract	<input checked="" type="checkbox"/> Information Disclosure Statement(s) Filed on : 1. <input type="checkbox"/> same as 371 request date 2. _____ 3. _____
<input checked="" type="checkbox"/> Drawing Figure(s) - (# of drwgs. <u>18</u>)	<input type="checkbox"/> Assignment Document (forwarded to Assignment Branch)
<input type="checkbox"/> Translation of Article 19 Amendments <input type="checkbox"/> entered <input type="checkbox"/> not entered : <input type="checkbox"/> not a page for page substitution <input type="checkbox"/> replaced by Article 34 Amendment	<input type="checkbox"/> Assignee Statement Under 37 CFR 3.73(b)
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<input type="checkbox"/> Application Data Sheet	<input type="checkbox"/> Substitute Specification Filed on : 1. <input type="checkbox"/> same as 371 request date 2. _____ 3. _____
<input type="checkbox"/> Power of Attorney	<input type="checkbox"/> Verified Small Status Statement
<input type="checkbox"/> Change of Address	<input checked="" type="checkbox"/> Oath/ Declaration (executed)
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	<input type="checkbox"/> Other : _____

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Date of Completion of DO/ EO 903 - Notification of Acceptance

Date of Completion of DO/ EO 905 - Notification of Missing Requirements

Date of Completion of DO/ EO 909 - Notification of Abandonment

Date of Completion of DO/ EO 916 - Notification of Defective Response

Date of Completion of DO/ EO 922 - Notification to Comply w/ Requirements for Patent Applications Containing Nucleotide and/or Amino Acid Sequence Disclosures

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